

ACT Council of Social Service Inc. (ACTCOSS) logo.

ACTCOSS Update Journal

Issue 91, Autumn 2020:  
Wellbeing in the ACT

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Wellbeing in the ACT

By Dr Emma Campbell, CEO, ACT Council of Social Service Inc. (ACTCOSS)

In March this year, ACTCOSS welcomed the launch of the ACT Wellbeing Framework by the ACT Government. We supported this Framework because it recognises that a wide range of domains and indicators, beyond the economy, impact the wellbeing of people in Canberra, including identity and belonging, environment and climate, living standards and social connection.

The Framework can be used to hold the ACT Government accountable and to bring attention to specific groups in our community whose wellbeing may be hidden by standard economic measures.

Both federally and here in the ACT, we have seen similar frameworks come and go with changing government priorities and political preferences. ACTCOSS is keen to ensure that the Wellbeing Framework – a framework that has been developed with the community – is embraced by all sides of politics.

Following the release of the Framework, ACTCOSS thought it would be valuable to examine wellbeing in more detail. In the opening article of the journal, Dr Katherine Trebeck highlights that a ‘wellbeing economy’ must take care of the economic wellbeing of people while also protecting resources and the environment.

Some of the other great articles in this journal look at promoting and improving the wellbeing of everyone in our diverse Canberra community, including migrants, children, people who identify as LGBTQI+, and people with complex housing or social needs. If we are serious about improving wellbeing in the ACT, the issues raised in these articles should be important to the whole community sector – not only specialist organisations and groups.

I cannot escape mentioning COVID-19, not least as part of my apology for the delay in releasing this ACTCOSS journal edition! We have been very busy at ACTCOSS working with our members to respond to the extraordinary situation faced by the community sector and the people it serves as a result of this crisis.

The wellbeing of all community members is threatened by the health and economic impact of the COVID-19 disease and the necessary responses. In these articles – written before the current crisis – we are made aware of the existing vulnerabilities of groups, including victims of crime, carers and new parents. These are also some of the groups faced with grave challenges during COVID-19, not least because of the isolation resulting from social distancing. The community sector should be proud of its efforts to adapt service models and reach out to those in need to support wellbeing across Canberra. To ensure a swift recovery from this crisis, wellbeing must be at the heart of our response.

The articles share a common message: that we need systemic policy changes as well as community-led responses. In the midst of the COVID-19 crisis, ACTCOSS is pleased to take this opportunity to showcase the expertise of our members through clear policy advice, best practice and ideas based on evidence, and experience on meeting the challenge of ensuring wellbeing in the ACT.

A wellbeing economy

By Dr Katherine Trebeck, Wellbeing Economy Alliance

10 February 2020

I write this as a Canberran living in Scotland. For the past few months, I’ve wished I could somehow send every drop of rain hitting my window to the scorched land where I grew up.

Australia’s recent fires are a stark reminder that society has moved a long way from embracing the original meaning of the word economy as ‘household management’. Australia’s economy could hardly be described as doing enough to manage and protect our shared home.

Many people suggest that if the current economy is made greener or ‘cleaner’ then things will be fine. This not only ignores the inequality and poverty created by the current economic setup, but it relies on separating (what is known as ‘decoupling’) the growth of an economy from environmental impact to an extent that is practically impossible.[[1]](#footnote-2) On the social side of things, many suggest that if growth is more ‘inclusive’, things will be fine, but that ignores the environment.

Australia is not alone in struggling with these tensions. Research from the University of Leeds[[2]](#footnote-3) found no (national) economy able to meet the needs of its people without putting unsustainable pressure on the planet. While economic practices of previous years may have yielded some benefits for some and in some places, relying on the same recipes for the future is no longer good enough.

The benefits of growth are entering a stage when they bring less bang for their buck (what economists would term ‘diminishing marginal returns’). For countries such as Australia with higher GDP per person, a lot of what is counted as growth (rises in GDP) is driven by fixing and cleaning up harm done in pursuit of growth (termed ‘failure demand’ in social policy and ‘defensive expenditure’ in environmental terms).[[3]](#footnote-4) For example:

* Rebuilding after bushfires exacerbated by a warming climate
* Treatment for people who are stressed and turn to drugs
* Medical care for people whose asthma is made worse by pollution
* Night shelters for the homeless
* Security guards and CCTV cameras.

Recognising diminishing marginal returns and failure demand allows us to acknowledge the need for new ways of thinking about the economy. An economy designed for social justice and environmental health can be termed a ‘wellbeing economy’[[4]](#footnote-5): one that asks what sort of economic activity, and for whom, is necessary to deliver these goals?

## Challenges in shifting to a wellbeing economy

Building a wellbeing economy is far from an easy task. Many institutions and government apparatus depend on economic growth. People hope jobs and improved standards of living will flow from a growing economy, but unfortunately a growing economy does not necessarily mean more jobs, let alone good quality jobs,[[5]](#footnote-6) and recently much growth has gone to the wealthiest.[[6]](#footnote-7)

Then there is the transition. New skills will be needed, alongside new jobs, new ways of working, new infrastructure, and new ways of measuring success. In a wellbeing economy, some industries will be smaller (if they exist at all). People working for those industries need stable pathways to new work and to secure incomes (the ‘just transition’ conversation that unions, governments and others are exploring). Towns and communities that depend on these industries will also need help to adjust.

## Inspiration

Fortunately, from my wee vantage point here in Scotland, a lot is already happening:

* In 2015, countries signed up to the Sustainable Development Goals with their vision of a world without poverty, with less inequality and where production and consumption does less harm[[7]](#footnote-8)
* My adopted home of Scotland is joining with countries such as Iceland and New Zealand to collaborate in putting collective wellbeing at the heart of economic policy making[[8]](#footnote-9) through the Wellbeing Economy Governments (WEGo) partnership. I hope that in due course some Australian states and territories sincerely committed to ensuring the economy works for people and planet might join WEGo
* Countries such as Costa Rica show the possibility of high quality of life without a large economy (as measured by GDP)[[9]](#footnote-10)
* Businesses are thinking more broadly about their impact.[[10]](#footnote-11) On a recent trip home, it was striking to see many Australian businesses embracing their wider responsibilities
* Around the world, a movement is growing, comprising individuals, academics, businesses, young people, and civil society organisations collaborating to build a wellbeing economy[[11]](#footnote-12)
* Here Scotland:
  + Zero Waste Scotland is promoting a circular economy
  + Scotland’s Business Pledge celebrates businesses delivering positive social impact and government supports inclusive businesses
  + The National Performance Framework puts collective wellbeing and kindness at the centre of Scotland’s goals
  + Attention is on gender equality
  + Glasgow and Edinburgh have strong climate change targets and both Councils passed resolutions to support the wellbeing economy agenda.

And you don’t need me to tell you that the ACT is leading the world on a suite of measures which speak to the wellbeing economy agenda.

## More to do to build a wellbeing economy

Building on these steps to create a wellbeing economy requires a huge number of changes. Here is a small selection of changes that my co-author Jeremy Williams and I highlight in *The Economics of Arrival*.[[12]](#footnote-13) The ACT might even be able to tick off a few of these already?

* Measure progress broadly, reduce the importance of GDP figures, and distinguish between healthy and unhealthy growth
* Address inequalities: incorporated into every department, with all policies and spending assessed accordingly
* Increase circularity in the materials economy and encourage sharing resources through libraries, time-banking, car-pooling, and so on, and stop social or environmental costs being externalised. Tools include taxation, air pollution targets, efficiency standards, and regulating to make companies responsible
* Enhance ‘predistribution’: reducing need for costly redistributive bureaucracy. Employee ownership, community-owned utilities, salary ratios or a maximum wage would help. Promote these via government regulations, procurement, and encouragement
* Support flexible and part time working. Changing the costs facing employers so they are rewarded rather than penalised for taking on more staff is useful: better would be shifting to wealth and capital taxes
* Increase democratic participation, from regional devolution to electoral reform, giving people more opportunities to influence decisions.

## Conclusion

On their own, such steps aren’t enough. But since systems thinkers encourage us to embrace gradual changes as incremental steps that eventually add up, they can be seen as ‘radical incrementalism’. Places such as the ACT and Scotland, with their readiness to try doing things differently and recognition that the new times we’re in warrant new approaches, demonstrate that change is possible. They are the pioneers of the sort of economy that takes better care of its people and our planetary home – and so they’re closer than the many miles between them suggests.

Wellbeing Economy Alliance:  
[wellbeingeconomy.org](https://wellbeingeconomy.org)

Migrants, wellbeing and connectedness in the ACT: more than ‘benign indifference’

By Karen Hall

The ACT Government’s 12 domains of wellbeing (see table below) have been drafted to capture what Canberrans see as the fundamentals needed to live a good life. As well as basic needs such as housing, safety and health, the draft domains – based upon input from community members, educators, community sector workers and policy makers – include interpersonal needs, such as social connection, belonging and cultural identity.

|  |  |
| --- | --- |
| The ACT Government’s draft wellbeing domains | |
| Living standards | Education and life-long learning |
| Housing and home | Physical and mental health |
| Time use | Governance and institutions |
| Environment | Mobility and accessibility |
| Social Connection | Belonging and cultural identity |
| Economy and the region | Safety |

These interpersonal needs are of particular importance to migrants who choose to settle in Canberra. All migrants leave behind lives of significant value, meaning and investment when they start again in a new country. A 2019 Canberra-based study[[13]](#footnote-14) found that migrants’ wellbeing was heavily dependent on their capacity to establish social connections and to develop a sense of belonging.

The research focused on how much (or how little) the Canberra community had engaged with the participants after their arrival to the ACT, and how this had affected their settlement experiences and wellbeing. In-depth interviews with 15 participants from diverse national and cultural backgrounds[[14]](#footnote-15) found that few of them felt welcomed or supported by the Canberra community upon their arrival to the ACT. It suggests Canberrans don’t realise how meaningful even small gestures of inclusion can be for newcomers.

Research has consistently shown that social connectedness (in the form of active inclusion and everyday interaction[[15]](#footnote-16)) is a key determinant for migrant wellbeing and happiness, and for enabling migrants to integrate into their new communities.[[16]](#footnote-17) When migrants experience social isolation and marginalisation it affects not only their settlement outcomes, but also their health and wellbeing.[[17]](#footnote-18) The cost of emigrating and setting up in a new country, and the high cost of housing in Canberra, mean migrants may experience financial hardship that can lead to isolation and exclusion. Migrants with limited English-language skills may feel particularly isolated.

The migrants interviewed for this study described *belonging* as engagement, trust, safety, understanding, respect, value, acceptance and welcome – words they also used when asked to name the ingredients for a healthy *community*. They pinpointed three obstacles to developing a sense of belonging in Canberra: lack of community contact, difficulties finding employment, and Australia’s social drinking culture.

## Community contact

The newcomers who had neighbours reach out to them when they arrived were by far the most positive about their early days in Canberra. Several noted how much it meant to have a meal cooked for them, or for a neighbour to cross the road to say hello and welcome. One was grateful for the bed provided for him to use, whilst another described relief at being invited to join another family at the local park.

The common thread is that each of these acts was of enormous and memorable import to a newcomer who felt disoriented, overwhelmed and vulnerable. Those who did not experience this outreach from the host community described trying to connect as an ‘exhausting’ and ‘depressing’ process.

The participants shared examples of things that could have made their earliest days easier, such as help navigating the Medicare system, or advice about pre-school and childcare. One mentioned the information pack provided by the ACT Government, ‘an information overload of Canberra facts and history’, when advice on how to meet people in Canberra would have been more helpful.

One newcomer said government service providers told her, a number of times, to go to her cultural ‘community leaders’ for settlement support. This incorrectly assumes that coming from a particular country means automatic inclusion in the same cultural community in Canberra, or even that such ‘community leaders’ exist and are accessible.

## Employment

Securing a job is important not only from the perspective of providing income, but also for its role in creating connections and a sense of belonging, and for giving migrants the capacity to contribute, both by paying taxes and by sharing their skills. More than half of the respondents said the ‘exhausting’ search for employment directly undermined their capacity to feel any sense of belonging.

The Commonwealth Public Service is the ACT’s largest employer, but Australian citizenship is a requirement for all public service positions, narrowing the job market considerably for migrants who had not yet obtained Australian citizenship.

One participant who struggled to secure job interviews said she was advised by a recruitment firm to truncate her ‘too long’ surname and create a new email address: after doing so, she started receiving calls for job interviews, and soon after received a good offer. Another participant was advised to tone down his expressions of ambition in interviews, because ‘Australians prefer a more modest approach’. He too was employed soon after making the suggested change.

Australia’s lack of recognition of overseas qualifications proved an obstacle for many: one participant had taken a job in aged care because her medical qualifications were not recognised, while her husband, a qualified architect, had only been able to find work as a manual labourer.

## Social drinking

More than half of the research participants – both male and female – reported that Australia’s social drinking culture hampered their efforts to engage socially. For some, this was due to religious restrictions on consuming alcohol, but for others, the cost of alcohol was a major factor. The Friday afternoon practice of shouting a round of drinks, a ‘symbol of mateship and solidarity’,[[18]](#footnote-19) is simply not affordable for many newly-arrived migrants. It suggests many Canberrans don’t understand the income pressures migrants face, and their efforts at inclusion may lead to unintentional exclusion.

More than 10,000 migrants moved to Canberra in 2017-18[[19]](#footnote-20), and one third of the ACT’s population is overseas-born. The ACT has one of the most educated populations in Australia and is, as a society, well-versed in the language of multiculturalism and inclusion. However, the research indicates there is much more Canberrans can do at the community level, neighbour-to-neighbour, to support and welcome new migrants. The participants said they experienced very little racism in Canberra: their experiences are less about feeling unwanted, and more about feeling unseen. One participant described it as ‘benign neglect’ – Canberrans place high expectations on migrants to integrate into their new communities, but need to recognise that their support and social connection are the key to migrants achieving those outcomes.

Seen and heard: embedding children’s perspectives on wellbeing into community development in the ACT

By Amalia Fawcett, Wellbeing Hub Manager, Community Services #1

Children’s wellbeing requires nuanced analysis to ensure policies, programs and budgets are appropriate. There is a growing international effort to measure societies’ success in terms beyond economic prosperity, increasing the focus of government and community towards understanding wellbeing. However, these efforts seem not to counter-act growing rates of poor mental health among children in the ACT and beyond. Could it be that a key aspect of the analysis is missing? This article asserts that the limited application of children’s perspectives in planning, implementation and review of services is that missing piece. Continuing to ignore it contravenes children’s rights and risks their wellbeing.

## What do we mean by wellbeing?

Wellbeing is a subjective measure of a person’s satisfaction with their life. Most definitions include various domains, which can include standard of living, health, achievements, relationships, safety, community connection and participation, future security, spirituality and a person’s relationship to their environment.[[20]](#footnote-21)

Given this article draws on a range of sources, it will not define wellbeing further than the list above. Any definition must include the perspectives of the client group, and this is even more important for young children, who seldom have the opportunity to shape this kind of discourse.

## How are children doing in the ACT?

The Convention on the Rights of the Child defines children as anyone under the age of 18. The definition of young people (14-25-year-olds), overlaps with this definition. For the purposes of this article, those between 14 and 18, who fit both definitions, are considered children. Young people over 18 also often lack authentic opportunities to participate, but this article focuses specifically on children because their developing capacities require a greater degree of adult support to access their participation rights. Young people, while still requiring support, are capable of exercising a greater degree of agency to bring this about.

Although there is more to wellbeing than mental health, in the interests of brevity, this single domain will be used here as an indicator of overall wellbeing. Sadly, this leads to the conclusion that a significant proportion of children are struggling.

According to a 2019 survey by Mission Australia and Black Dog, Canberra teens consistently report some of the highest rates of psychological distress in the country.[[21]](#footnote-22) Nearly half of all 17-year-olds surveyed had experienced psychological distress, and support systems are often over-subscribed.

Recently there has been increased demand for mental health care plans in the ACT for children,[[22]](#footnote-23) and in 2016 Kids Line Australia found that suicide was the leading cause of death among children between five and 17 years of age.[[23]](#footnote-24) The plight of children between eight and 12 years old has been characterised as a period of ‘benign neglect’[[24]](#footnote-25) but is now recognised as requiring greater attention.

Children are not a single homogenous group and intersectionality plays its part in increasing the vulnerability of specific groups of children. The indicators for Aboriginal and/or Torres Strait Islander children, culturally and linguistically diverse children, LGBTQI+ children and those with disabilities are consistently worse than for their peers.

## What are the links of children’s wellbeing to participation?

True participation requires that children are able to have a say about issues that affect them (article 12 of the Convention on the Rights of the Child), that they are able to access appropriate information (article 17), and they have freedom of expression (article 13). This must exist in tandem with strong adherence to child safety. Support from adults is required for children’s participation, establishing a clear relational element that links it to wellbeing:

A rights-based approach to participation draws attention not only to the child’s autonomy but also to the role that adults play in supporting children in the exercise of their participation rights; for example, the extent to which children perceive that the adults in their lives not only listen to and respect their views but also make it easy for them to access information and to give their views. In short, it could be suggested that at the heart of the relationship between child wellbeing and children’s participation rights lies the social or relational aspects of both participation and wellbeing.[[25]](#footnote-26)

Despite the growth of academic evidence linking participation and wellbeing, the current situation for children in Australia is falling short. In the recent Children’s Rights Report 2019, children ranked participation rights as among the least fulfilled in Australia.[[26]](#footnote-27) Children feel they are not being heard in their families or communities, nor are they receiving accurate information;[[27]](#footnote-28) posing a direct threat to our efforts towards children’s wellbeing.

To combat this, it is essential the community services sector in the ACT ensures programming and policy are informed by children’s perspectives. The avenues for children to express their opinions and gain information must be tailored to their developing capacities, their preferences for self-expression, and be in accessible formats.

More needs to be done to explore the links between wellbeing and participation in practice. It is an emerging area of academic research, but to apply this to our wellbeing programming in the ACT we need to capture good practice, lessons learned, and scalable approaches across the sector. Most importantly, we need all this to be informed by the authentic and safe participation of children. Only then can we address the disparity between mental health indicators and children’s wellbeing.

|  |
| --- |
| Wellbeing Hub  In 2020 Community Services #1 will launch a Wellbeing Hub that will support children, young people and their families to enjoy physical and mental health, have strong social connections, participate in their communities, and feel safe. If you want to hear more or be involved, please contact [amalia.fawcett@communityservices1.org](mailto:amalia.fawcett@communityservices1.org). |

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Wellbeing in the LGBTIQ+ community of South Canberra

By Megan Watts, Secretary, Diversity ACT Community Services

Australian lesbian, gay, bisexual, transgender, intersex and queer (LGBTIQ+) communities and individuals are extremely diverse, and we face a range of shared and distinct health, wellbeing and social inclusion issues. When LGBTIQ+ people require access to health and wellbeing services, we hit more roadblocks, which can cause us to refrain from accessing critical services. As a result, we experience poorer health and wellbeing outcomes than our non-LGBTIQ+ peers.[[28]](#footnote-29)

A dominant theory of wellbeing is the minority stress model[[29]](#footnote-30), which suggests that the reason for poor health and wellbeing in LGBTIQ+ communities is the discrimination that we experience in our everyday lives. A 2018 Australian study determines that lesbian, gay and bisexual (LGB) people living in electorates with a larger share of people who voted ‘no’ in the sax-sex marriage postal survey have significantly worse general health, mental health and life satisfaction than LGB+ people living in electorates with a larger share of ‘yes’ voters.[[30]](#footnote-31) This study also found that perceived social support (friendships, good social relations and strong networks) contributed to the observed link between stigma and LGB health and wellbeing. The study found that LGB people living in areas with higher levels of ‘yes’ voters received more social support than LGB people living elsewhere.

So, does that mean that the Canberra LGBTIQ+ community has levels of wellbeing among the best in the country, given that we had one of the highest ‘yes’ votes in the country? And do those levels change across different regions within Canberra? Sadly, that data is not freely available. The study by Perales and Todd does not include the ACT in its analysis, and no ACT-specific studies on this topic were located in the preparation of this article. This absence of data suggests that this is an area for future study.

What action has the ACT Government taken in recent years to mitigate the impact of stigma on the LGBTIQ+ community? Pleasingly, there are a number of initiatives to report. The creation of the Capital of Equality Strategy[[31]](#footnote-32) has articulated the government’s goal of making Canberra the most LGBTIQ+ welcoming and inclusive city in Australia. The establishment of the Office for LGBTIQ+ Affairs[[32]](#footnote-33) and the LGBTIQ+ Ministerial Advisory Council[[33]](#footnote-34) has brought community representation into government discussion and decision-making processes. The ACT Safe and Inclusive Schools Initiative provides assistance to schools to develop and maintain safe and inclusive environments for all students regardless of their gender presentation/identity, intersex status or sexual orientation.[[34]](#footnote-35) Round One of the Capital of Equality grants saw around $100,000 awarded to projects enhancing LGBTIQ+ visibility and inclusion in Canberra.[[35]](#footnote-36)

What have been the results of these actions and investments from the ACT Government? At this stage, there is no publicly available data measuring the impacts of these initiatives on health and wellbeing of the LGBTIQ+ community in Canberra more broadly, or South Canberra in particular. But what does anecdotal evidence provide? We can say with confidence that many of our younger members have reported the joy that the rainbow buses bring. The projects awarded under the Equality Grants have brought LGBTIQ+ representation into events such as Southfest – bringing public LGBTIQ+ representation into South Canberra in a new way through TuggersPRIDE.

However, South Canberra remains under-resourced when it comes to LGBTIQ+ services when compared to North Canberra. The major LGBTIQ+ organisations are based in North Canberra and receive ongoing funding. Diversity ACT Community Services (Diversity ACT) is the only such organisation in South Canberra, but it is run entirely by volunteers. Funds for even basic running costs such as insurance, power, computing and the like must be raised by sausage sizzles, donations and membership fees. Even in this difficult funding environment, we have successfully developed networks that give us a good sense of the needs of LGBTIQ+ people in the south.

Diversity ACT remains concerned about the safety and wellbeing of the LGBTIQ+ community in South Canberra. There has been a noticeable increase in self-referrals to our organisation already in 2020. Our clients continue to face challenges in fundamental areas such as access to safe and secure housing, nutritious and regular food, and sufficient clothing that is appropriate to the season. It is difficult for our clients to move into wellbeing areas such self-actualisation and self-esteem when they are battling to achieve the base levels of Maslow’s hierarchy of needs.[[36]](#footnote-37) Despite our high ‘yes’ vote, there are still people in Canberra being forced into insecure housing and facing food shortages because of anti-LGBIQ+ sentiment.

One of the aims of Diversity ACT is the maintenance of a strong and inclusive community for LGBTIQ+ people. We support equal rights and treatment for all Canberrans regardless of their sexual or gender orientation. We look forward to continued action from the ACT Government to mitigate the impact of stigma and improve the wellbeing of the LGBTIQ+ community, and to the release of data around these initiatives. We are hopeful of partnering with the government and other players in the community services sector to bring about further change.

To that end, we are seeking to provide monthly community events at the Diversity Hub in Kambah throughout 2020. The program of events is aimed at increasing community awareness of Diversity ACT and fostering higher levels of inclusiveness in South Canberra. We hope that LGBTIQ+ people, their families, friends and the wider community will join us in building a culture of inclusion, and thus improve wellbeing for all. Please feel free to follow us on Facebook to keep up to date with our community events program – [facebook.com/diversity.act](http://facebook.com/diversity.act) or check out our website at [diversityact.org.au](https://www.diversityact.org.au/)

Diversity ACT Community Services:   
[diversityact.org.au](https://diversityact.org.au/)

Safe homes create secure futures

By Andrew Rowe, CEO, Havelock Housing Association

It is heartening to hear that the ACT Chief Minister, Andrew Barr MLA, is launching the ACT Government’s ACT Wellbeing Framework on Canberra Day.

This framework is the result of extensive research, reflection and consultation for over a year, and is the result of the government’s encouraging acknowledgement that the traditional economic measures of wellbeing are inadequate. For the Canberra community, ‘things like our environment, our connections to place and to others, the quality of our services and institutions, how inclusive we are towards others and our preparedness to contend with future challenges and opportunities’[[37]](#footnote-38) are also fundamental to our understanding of ‘wellbeing’.

In our work at Havelock Housing Association, we reflect daily on what contributes to safer and more secure lives for our residents. Our aim is to ensure that every Canberran has a safe and secure home, and contributes to a vibrant and connected community life.

Without a secure home, and an attachment to place and community, it is immeasurably more difficult for people to build happy and stable lives, and contribute to community life.

An affordable home is becoming more and more out of reach of many in our community. Canberra has the second highest median rent in the nation, with $490 per week for apartments and $500 per week for houses compared with the national median of $450, with the second highest percentage increase.[[38]](#footnote-39) The National Rental Affordability Index released in November 2019[[39]](#footnote-40) revealed that in the ACT, rent for:

* A single bedroom dwelling is 115% of annual income for a single person on Newstart, and 75% of annual income for a single pensioner
* A 3-bedroom share house takes 35% of 3 university students’ annual income on Youth Allowance or Austudy and the maximum additional income allowed before their income support payments are affected.

Some further sobering statistics – in the ACT[[40]](#footnote-41):

* 73.7% of Commonwealth Rent Assistance (CRA) recipients under the age of 24 experienced rental stress (spending more than 30% of their income on rent), compared with a national average of 57.7%
* 35.2% of Aboriginal and/or Torres Strait Islander CRA recipients experienced rental stress, compared with a national average of 33.2%
* 48.3% of all CRA recipients in the ACT experienced rental stress, compared with a national average of 40.5%.

On top of this, every year in January Canberra has an influx of people needing rental accommodation, including students from interstate or overseas, Australian Defence Force personnel, and public servants contributing to a vacancy rate of less than 2% in the private rental market.[[41]](#footnote-42) If you receive Newstart or Youth/Student Allowance, it is now virtually impossible to rent privately in Canberra due to affordability and availability issues.

Havelock Housing Association currently provides homes for over 400 people in more than 200 properties, including for about 100 people with disabilities.

The Havelock Team’s passion and commitment makes a real difference to the lives of those who make a home with us, building on Havelock Housing’s long history of making a positive social impact.

Our commitment to the Canberra community is to deliver high quality and efficient community housing services, strengthen our partnerships, and grow the number of homes we can provide. We want to make an even more significant contribution to the sense of wellbeing of those experiencing homelessness and housing stress by providing more safe homes and more secure futures.

Our services are founded upon the ‘Housing First’ principles, ensuring that our residents have the stability and support they need to build a secure future. As part of this, we are also committed to building our organisation’s community development capabilities focused on enhancing health, social inclusion and interaction with community for our residents. We see these as basic building blocks for a well-connected life where people feel that they can identify and seek the support networks they need to stay happy and well.

We hope the ACT Government will actively use the Wellbeing Framework to inform future housing policy that will support Havelock Housing Association and other providers to grow our housing stock and improve social housing in the ACT.

Havelock Housing Association:  
[havelock.asn.au](https://www.havelock.asn.au/)

Wellbeing in the ACT – a challenge for many affected by crime

By Victim Support ACT, ACT Human Rights Commission

With its launch of the ACT’s Wellbeing Framework on 9 March 2020, the ACT Government has announced a set of indicators which it will use to measure wellbeing in the territory and guide its future policies and investments. These indicators will be used to track the wellbeing of the Canberra population as a whole, as well as particular subsections of it, such as our Aboriginal and Torres Strait Islander community. Of course, each individual’s sense of wellbeing can be influenced by a broad combination of factors, and some of the most universal include:

* Financial stability
* Good mental and physical health
* Secure housing
* Strong relationships
* Good work-life balance.

Unfortunately, our experience at Victim Support ACT is that for most of our clients, a strong sense of health and wellbeing is not a familiar feeling. It might not be surprising to hear that the direct impacts of violent crime – physical and psychological injury, property damage or loss and so on – linger long after the incident and can influence a person’s sense of wellbeing. What is less well-understood is the way in which this trauma is exacerbated as the person tries to navigate long and complex legal and bureaucratic processes, which many times fail to consider their needs. Each time a person affected by crime faces a barrier to accessing information or participating in the criminal legal process, the negative impacts which the incident of crime has had on their sense of wellbeing can be compounded.

While reported crime in Canberra has reduced in recent decades, it remains a significant social problem that has a negative impact on people affected by violence, as well as their family, friends and colleagues. Becoming a victim of crime can have a range of impacts on people, not just on their physical and mental health, but also their employment, education, finances and their general wellbeing. People affected by crime experience short and long-term affects such as shock, loss of trust, guilt, uncertainty, embarrassment, distress, disempowerment, fear, anxiety, depression, confusion, sadness, anger and stress. Many people affected by crime experience suicidal thoughts and suicide attempts. As one client said to me recently:

The scars on my soul, the ones you can’t see, last forever.

The physical impacts of crime also take a high toll as people deal with operations and life-long health problems. Other impacts which are often long-term are loss of income and other forms of financial stress, and social isolation. A person affected by crime may also use maladaptive coping strategies or defence mechanisms, which can have devastating impacts on their health as well as increase the likelihood that they will again be affected by violent crime. The economic and social cost of crime is also immense, and there are many research papers which chronicle them.

We know that crime does not affect people in the same way. The extent and impact on the person affected by crime is influenced by many factors, one being the support the person can access following the crime. Support can be informal – through family, friends or community members – or through a range of specialised services. At Victim Support ACT, we provide support, advocacy and practical assistance to people affected by crime through several programs. Our programs are free, trauma informed, culturally sensitive, and available to anyone who has been affected by crime committed in the ACT. The help we provide to our clients is very dependent on their individual needs, and we are passionate about giving a voice back to people affected by crime, who too often feel that they have been forgotten and ignored through the criminal legal process. We do this by helping our clients to understand the criminal legal process and advocating to help them access their rights. We also provide a voice for people affected by crime in the development of legislation and policies across various justice agencies.

Some of the things Victim Support ACT can do to help a someone recover from the impacts of crime, and to mitigate against further trauma induced by being (an all too often neglected) participant in criminal legal processes include providing:

* Free counselling and other therapeutic services
* Information about reporting a crime to police and what to expect at Court
* Information and support to apply for financial assistance, which can help to pay for or reimburse the costs of goods or services needed to help in recovery
* Assistance to prepare a Victim Impact Statement, so that the victim can have their voice heard in Court.

We know that preparing for and attending Court can be an immense source of stress for people affected by crime. Not only is the process of giving evidence often re-traumatising, everything which surrounds that moment can be very unfamiliar and intimidating for someone who does not have support. Our Court Support Program aims to alleviate some of this stress, and we can attend Court with clients to help before, during, and after they give evidence. We can also go to Court with people who are applying for or responding to Protection Orders. For our clients, navigating the Court process with someone by their side who is highly skilled and trained goes a long way to lessening unnecessary anxiety associated with attending Court.

It is our hope that, as it uses its new indicators to track wellbeing, the ACT Government will gain a greater understanding of the complex web of factors which make up both an individual’s and a community’s sense of wellbeing. We hope that this data will be utilised not just to inform policies and programs which will help people affected by crime in the ACT, but also to help prevent future crime. We know that certain members of our community – such as Aboriginal and Torres Strait Islander people, people with disabilities, LGBTIQ+ people and those from culturally and linguistically diverse backgrounds – are at particular risk of being affected by violent crime. Improving the wellbeing of our community *must* include addressing this unacceptable risk and ensuring that when we talk about measuring and improving the wellbeing of Canberrans, we mean every Canberran.

Victim Support ACT:  
[victimsupport.act.gov.au](https://www.victimsupport.act.gov.au/)

Carer health and wellbeing

By Carol Archard, Manager of Policy and Advocacy, Carers ACT

A quarter to a third of women are in caring roles throughout their lifetime according to a recent longitudinal study on Australian women’s health by the Department of Health.[[42]](#footnote-43)

‘Carers’ as described in this article does not refer to paid support workers; it refers to the unpaid friends and family carers that provide hours of care and support that would otherwise cost the government over $60 billion dollars every year in replacement care.[[43]](#footnote-44)

There are, of course, male carers and their numbers are growing; nonetheless, most of the care continues to fall to women. This caring role is often not a chosen vocation but an expectation to care for a friend or family member.

The study showed that carers who were satisfied in their role were 50% less likely to have thoughts about life not being worth living than those that were dissatisfied. Those dissatisfied also reported poorer physical and mental health, higher anxiety levels, lower optimism, and less social support.

There was also a difference in impact for carers who live with the person they care for and those that don’t. The study indicated that carers that do not live with their cared-for person tend to fair better.

According to the study, live-in carers are more likely to:

* have poorer self-reported health
* be less physically active
* smoke
* be obese
* have poor adherence to recommended fruit intake
* ignore pap test recommendations
* have increased levels of stress, anxiety and depression
* make more visits to the GP and an increased number of scripts filled
* be three times more likely to have chronic conditions (specifically breast cancer, diabetes, asthma, heart disease, stroke, and arthritis).

The women’s health study also found an unexpected outcome, that the impacts on health of women experiencing family violence and women in caring roles were comparable, with both groups being more likely to have higher stress, more depressive symptoms, and poorer physical health than non-carers and people not experiencing family violence. This in no way negates the very different and serious nature of family violence. It is merely an indicator that the impact on carers may not have been recognised as being as serious as they are. The positive result the study found was that health measures for carers increased with better personal resources like resilience and social support.

So, it is vitally important to ensure carers are supported to gain satisfaction in their role and have good access to resources that improve physical and mental health, as well as assistance with personal resources that improve resilience and access to social support.

Carers ACT seek to mitigate this impact by providing relevant supports and resources to carers. The way Carers ACT are doing this is changing.

From April 2020, Carers ACT will deliver the ‘in person’ services for the Carer Gateway for the ACT.

This is designed to focus on early intervention, coaching and supporting carers independently of the needs of the person they care for. The Carer Gateway currently includes a website for carers to access free telephone counselling, online self-guided coaching, online peer support community forums, carer skill courses, and information about topics such as planning for an emergency, carer payments, and legal matters.

The ‘in person’ component of the Gateway delivered by Carers ACT will include emergency respite and support groups. Other services will be new such as ‘in person coaching’ and the introduction of yearly care plans for all carers. The current Carer Gateway telephone number (1800 422 737) will become the national number to access Carer Gateway services.

Aside from the Carer Gateway, Carers ACT continues to offer other carer supports such as systemic and individual advocacy, access to education, skill building, social activities, access to education, skill building and social activities, help navigating systems, SHAW scholarships, services for people who are ageing and their carers, services for people with disability and their carers, and mental health carer support and advocacy.

For further information regarding carer services generally please ring Carers ACT on 02 6296 9990.

For further information on the article please contact [carol.archard@carersact.org.au](mailto:carol.archard@carersact.org.au)

Carers ACT:  
[carersact.org.au](https://www.carersact.org.au/)

Advertisement from HESTA:  
Why women need to boost their super

Women haven’t always enjoyed the same super rights as men. In fact, until the 1970s, some women were even excluded from super when they got married.

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On average, women are still paid less than their male counterparts.\* Plus, the amount of super women generate during their working lives is often impacted by career breaks to care for family and a greater tendency to work part time.

Coupled with the late introduction of compulsory super in 1992, these factors have left many working women at a disadvantage when it comes to their super savings.

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At HESTA, we’re here to help our members every step of the way.

In fact, most of our members are women, so our Advice and Education team understands the challenges women face in building their super.

Take your first steps to a better tomorrow today — to start changing your future.

Visit [hesta.com.au/boostmysuper](https://www.hesta.com.au/boostmysuper) for ideas on how you can boost your super or call 1800 813 327 to speak to a HESTA adviser.

\*[www.wgea.gov.au/topics/gender-pay-gap](http://www.wgea.gov.au/topics/gender-pay-gap)

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An opportunity not to be missed: Wellbeing for families and the organisations supporting them

By Dr Yvonne Luxford, CEO, Perinatal Wellbeing Centre

I like to think that Canberrans have a lot to be proud of, and becoming the first Australian jurisdiction to include wellbeing indicators in our budget process adds another positive entry in our ledger. However, this distressing summer has tested our capacity to maintain a sense of wellbeing, and has seen demands for both community-based and government health services soar.

Invariably, staff in the community sector have a passion to work with people and support them through the vulnerable times in their lives. Definitely in it for love, not the money, they are frequently employed at pay scales and benefits such as superannuation rates well below the average for this government-centric city. Yet they contribute immeasurable amounts to the wellbeing of our community, and to that of future generations.

Our own organisation has been caring for and supporting new parents for thirty years and was well known as PANDSI, but in recognition of the broader role we play in our community, we sought a more relevant and accessible name. Hence Perinatal Wellbeing Centre came into being during Mental Health Month 2019. Shortly afterwards we released a study[[44]](#footnote-45) by PwC Consulting (in collaboration with our Perinatal Mental Health Consortium partners) that finally quantifies the costs of perinatal ill health to the Australian economy, and hence the contribution that community mental health services such as our own make to reducing those costs and improving wellbeing.

The report found that 1 in 5 mothers and 1 in 10 fathers and partners experience perinatal depression and anxiety or ‘PNDA’. For each annual cohort of births, this costs our economy $877 million in the first year of those babies’ lives, with $7.3 billion in total costs attributable to perinatal depression and anxiety over the child’s lifetime. Using our percentage of the nation’s births, this indicates that perinatal mental health issues cost the ACT more than $100 million over the lifetime of every annual cohort of newborns.

PNDA is seen to be prevalent in a number of cohorts, including Aboriginal and Torres Strait Islander, Culturally and Linguistically Diverse and LGBTIQ+ communities. These communities are also considered less likely to seek help due to barriers to access which may include proximity to services, language barriers and perceived social isolation. Perinatal Wellbeing Centre is currently seeking to address this challenge by co-designing specialised care pathways for different cultural groups.

The risk of experiencing PNDA is higher for those who have a previous history of mental illness. Similarly, the risk of recurrent PNDA is relatively high, particularly when the PNDA is experienced towards the severe end of the spectrum. A study has found that women who are hospitalised for the first episode of PNDA were 46 times more likely to experience PNDA after a subsequent birth.[[45]](#footnote-46)

Statistics released by the Australian Institute of Health and Welfare (AIHW) demonstrate that in 2016 suicide was the most common cause of maternal death,[[46]](#footnote-47) being the first time Australia experienced this. In the most recent release[[47]](#footnote-48) (2017) suicide has dropped to second place, but still represents 25% of all maternal deaths for that year. This shocking statistic emphasises the need for a greater focus on perinatal mental health, especially during the antenatal period, and the importance of clear intervention pathways.

Prevention, early intervention, and tailored treatment and support pathways are essential mechanisms to assist in the reduction of society’s financial burden and to foster improvement in the mental health and wellbeing of our families.

Numerous factors can contribute to the development of postnatal depression and anxiety, with a key factor being the experience of a traumatic birth, or disappointment in the birthing experience (such as not having a natural birth as planned due to complications). Currently almost a third (30.9%) of births in Australia are by caesarean section and almost half (43.1%) women birthing their first baby had the birth induced.[[48]](#footnote-49)

## Supporting new parents’ wellbeing

It would be valuable for parents to have an opportunity to debrief about the birthing experience with their midwife in the hours or immediate days following the birth. This would allow questions about treatment during the birth, unexpected procedures or outcomes to be explained and would validate the parents’ experiences. This simple additional protocol could significantly enhance understanding and acceptance, and reduce anxiety leading to longer term positive mental health outcomes.

Antenatal classes also provide an excellent opportunity to educate parents on perinatal mental health in a non-threatening manner, adopting a family-centred approach. Many classes currently offered in the hospital setting focus on birthing and feeding, but lack discussion on what is normal and what is not with regards to mental health and emotional wellbeing, both in the lead up to birth and afterwards. Incorporating these elements in antenatal classes would be valuable, with understanding and engagement potentially enhanced by utilising peer education, with the sharing of lived experience alerting pregnant families to potential triggers, as well as explaining what strategies offer personal assistance.

Alternatively, dedicated perinatal wellbeing workshops and courses would be a valuable adjunct to hospital-based or private antenatal classes focusing on the physical aspects of birth. With a broad focus on wellbeing, self-care and strategies to overcome potential problems, these courses could be made available online to provide greater reach to busy new parents. This would also enable parents to work at their own pace rather than adapt to specific scheduling requirements.

Much has been achieved in recent years to break down the stigma surrounding mental health issues. However, one area that remains poorly recognised, funded and supported is the perinatal mental health of both women and men. An opportunity exists for government-funded, sustained awareness-raising programs using social and traditional media to increase understanding of perinatal mental health at a population level, and to increase the number of people seeking help and therefore improving family wellbeing overall. Such campaigns could assist in dispelling myths surrounding concepts of perfect parenthood, and relieving the additional pressure that perpetuation of such myths places on families.

With social isolation being a well-established risk factor, and a growing understanding of the barriers that various cultural beliefs can pose to recognising and seeking help for perinatal mental health problems, it is important that a greater focus be placed on the care of Canberra’s multicultural communities.

To better support these communities, information needs to be made available in a variety of community languages. Media campaigns need to reflect the diversity of the community, and short videos in different languages could be produced for social media campaigns targeting those lacking skills in English.

## Maintaining wellbeing in the community sector

One aspect of wellbeing that is perennially neglected is the maintenance of wellbeing for those providing the care and support to others. Just as flight safety messages insist that you fit your own oxygen mask before helping others, it is vital that we embed funded self-care mechanisms across the community sector. Taking care of yourself is the basic foundation upon which all other things rest. It is vital to identify your own needs and take deliberate steps to meet them.

I would hope that all community organisations offering counselling services provide professional supervision for their staff, and some also provide an Employee Assistance Program (EAP), but such care can severely diminish tight budgets. In addition, staff should be encouraged to practice deliberate actions which nourish and restore their wellbeing while supporting their physical, emotional and mental health.

This could be as simple as encouraging shared lunch time activities such as inhouse bingo (a guaranteed stress reliever around our lunch table) and walking groups, nurturing office plants for the greenfingered, moving lunch outdoors on clear days, or whole-of-office yoga classes. The trick is to ensure that there is enough time for these pursuits without feeling pressured to rush back to work, no matter how much work is waiting.

Many organisations offer their staff a couple of extra paid days over the end-of-year break in addition to public holidays, and some are taking this further by offering two days in addition to the Easter break this year in recognition of the stressful summer we all experienced, and the increased load that brought with it.

An innovative extension of this has been implemented by MIEACT. As a way to promote and engage all staff in work-life balance and positive mental health practices, staff are offered an additional monthly Wellbeing Day (excluding December/January due to gifted leave provisions). These days are non-accrued and staff are encouraged to plan ahead for their monthly day off to focus on themselves.

They also promote early help-seeking and self-care as early intervention tools. Employees are encouraged to schedule a proactive EAP session twice annually as a self-care session for reflection and continued balance in their life as part of their routine employment.

The wellbeing of our families and community organisations are inextricably linked. Incorporating wellbeing indicators into our annual budget processes provides us all an opportunity to further explore the pivotal importance of wellbeing to our health and economy, the integral role played by community organisations in supporting and maintaining that wellbeing, and mechanisms to enhance the wellbeing of those organisations and their staff. It’s an opportunity we need to make the most of!

Perinatal Wellbeing Centre:  
[perinatalwellbeingcentre.org.au](https://www.perinatalwellbeingcentre.org.au/)

Supported health professionals guide Canberrans through a complex health system

By Melissa Morthorpe, HealthPathways Program Support Officer, Capital Health Network

Being unwell can be overwhelming and people are often at their most vulnerable while trying to navigate a complex health system. When ACT community members experience instances of ill health, it is dedicated health professionals who are there to partner with them in their journey back to wellbeing.

And this is why a well-supported healthcare workforce is essential to ensure Canberrans receive the right care, at the right place, at the right time.

But how do we support healthcare professionals? How can they stay up to date on all the services and supports available in the ACT to assist their patients and ease the burden? Where can healthcare professionals find clinical and referral information for hundreds of conditions that they can use at the point of care?

The answer – HealthPathways, specifically the ACT & SNSW HealthPathways program.

HealthPathways originated in Canterbury, New Zealand and is designed to support health professionals in delivering best practice care by providing up-to-date local clinical and referral information at the point of care. This can mean highlighting red flags in different conditions to watch out for and when and where to refer locally.

We spoke to Dr David Gregory and Dr Kate Molinari who regularly utilise HealthPathways for clinical and referral information to ask them how HealthPathways supports general practitioners (GPs) in the ACT.

Recently retired local GP Dr Gregory has over 30 years’ experience and is the outgoing Clinical Lead for the ACT & SNSW HealthPathways program.

‘It is difficult, in fact near impossible, for a GP to be confident and experienced in all areas of general practice. For example, a GP may have skills in mental health, obstetrics and transgender health but not feel confident with skin cancer management or performing vasectomies,’ said Dr Gregory

Dr Kate Molinari is a local GP who has a special interest in lactation support and is a Clinical Editor for the ACT & SNSW HealthPathways program.

‘I utilised the information on HealthPathways when one of my patients had a grommet fall out too soon in one ear. With the information on the pathways I was able to confirm the preferred duration for a grommet to be in place and the appropriate follow up and advice when one grommet extrudes too early,’ said Dr Molinari

However, good health is never achieved in isolation. The ACT health system cannot effectively support the wellbeing of Canberrans who may be experiencing ill health unless all levels of healthcare and community services collaborate to advocate for their patients.

This is why such an effort is made to ensure the information on HealthPathways is holistic and intended to promote the overall wellbeing of Canberrans. The referral and support services pages provide referral criteria and contact details about allied and community health services, as well as information on local community groups and social supports.

Having such a range of information readily available at the point of care facilitates referral to appropriate services, and increases the ease of access to local support services and community groups for all Canberrans.

The ACT & SNSW HealthPathways program is funded by four project partners: Capital Health Network (ACT PHN), ACT Health, COORDINARE (South Eastern NSW PHN) and Southern NSW Local Health District.

Capital Health Network:  
[chnact.org.au](https://www.chnact.org.au/)

Anti-Poverty Week 2019 wrap-up

By Mark Duggan, Co-Chair APW 2020 & Regional Manager, Red Cross ACT/SE NSW

Anti-Poverty Week (APW) 2019 was seen as a success by a number of measures including the number of events, media engagement and advocacy in increasing the public’s awareness of people living in poverty.

The level of support for the ‘Raise the Rate’ campaign was amazing, and we know that it is one of the most effective means of reducing poverty in Australia.

We saw lots of engagement from local non-government organisations leading to a number of activities in 2019. These included: the GIVIT *Unlikely* podcasts; the Toora Women staff who committed to living on the same income as their clients living on Newstart (outside of rent and utilities); the Woden Community Service *Big Issue* event; and the Community Services #1 Anti-Poverty Week lunch where staff provided meals for 30-50 people on a strict budget of just 66 cents per person. The lunch provided was excellent; well done, team. These examples were just some of the many amazing events in the ACT. Congratulations to everyone who held events during Anti-Poverty Week 2019.

As we work towards the 2020 APW planning, I am pleased to be asked to remain as Co-Chair for Anti-Poverty Week 2020, and I am very pleased to welcome Jenny Kitchin, CEO of Woden Community Service, who will be joining me as Co-Chair in 2020. We have started framing the local strategy and this will align with the national APW strategy, along with the ACT discussions on the ‘working together in creating pathways out of poverty’, and ‘preventing tipping points into poverty’.

Thank you to Susan Helyar (our 2019 Co-Chair) who was a wonderful advocate and who supported myself and the committee in 2019.

Anti-Poverty Week:  
[antipovertyweek.org.au](https://antipovertyweek.org.au/)

COVID-19

## Advocacy

ACTCOSS is working with our members, other peak bodies, ACOSS, the ACT Government and the Federal Government to advocate for people experiencing disadvantage during COVID-19. We are communicating regularly with the ACT Government and welcome input from all ACTCOSS members.

If you would like to flag issues affecting your organisation or vulnerable communities, please get in touch with ACTCOSS at [actcoss@actcoss.org.au](mailto:actcoss@actcoss.org.au).

## COVID-19 sector updates

We are emailing regular updates on COVID-19 advocacy, information and resources. You can check out previous COVID-19 updates here: [actcoss.org.au/policy/covid-19](https://www.actcoss.org.au/policy/covid-19)

If you would like to receive these updates, please email [communications@actcoss.org.au](mailto:communications@actcoss.org.au) and we will subscribe you.

## Join our teleconferences

ACTCOSS is hosting regular teleconferences on a variety of focus areas for participants to share information and coordinate advocacy on COVID-19.

Teleconference focus areas include:

* ACTCOSS members – to help shape our advocacy and find out about our work
* Disability
* Culturally and linguistically diverse (CALD) communities. Co-facilitated with the Canberra Multicultural Community Forum
* Children, young people and families
* Housing and homelessness. Co-facilitated by ACT Shelter
* Human resources
* Communications.

Please contact [actcoss@actcoss.org.au](mailto:actcoss@actcoss.org.au) for details on how to join these teleconferences.

ACTCOSS staff welcome & farewell

## Farewell

### Kathy Ehmann, Administrative Support Officer

Kathy joined the ACTCOSS team in August 2018, bringing a strong work ethic and level of efficiency and structure to her role which has been an asset to ACTCOSS. Kathy’s passion for the sector and the wellbeing of the ACT community was highly valued, and we wish her the best of luck in her new role. We are pleased she is remaining in the ACT community sector and look forward to remaining in touch.

## Welcome

### Dr Emma Campbell, Chief Executive Officer

Dr Emma Campbell joined ACTCOSS as Chief Executive Officer in January 2020.

Dr Campbell is a former CEO of the Federation of Ethnic Communities’ Councils of Australia (FECCA), Australia’s peak representative body advocating on behalf of Australians from culturally and linguistically diverse backgrounds.

Dr Campbell brings with her a dynamic and diverse work portfolio and a wealth of experience ranging across academia, the community sector, international crisis responses, business and government sectors.

She has a strong commitment to social justice and the community sector.

### Anna Cirocco, Capability Officer

Anna Cirocco joined ACTCOSS in February 2020 as Capability Officer. Anna has vast experience working on social justice issues in the community development sector both in Australia, Asia, Europe and Latin America. She worked for 12 years with an international NGO for young people on workers’ rights, campaign development, leadership training and capacity building. More recently Anna worked with refugees and asylum seekers through the coordination and expansion of Calvary’s Refugee Mentoring Program.

Anna has a passion for social justice, human rights and workers’ rights with experience in training, education, advocacy, organisational leadership and cultural competency.

Anna has language proficiency in Italian, Spanish and French, attained a Bachelor of Arts in Community Development from Murdoch University in 2019, and holds a Diploma of Leadership and Management from JCE Positive Outcomes.

### Mercedes Dent, CALD Support Officer

Mercedes started a secondment at ACTCOSS from Carers ACT in May 2020 as part of a partnership to develop and document communication channels to reach Canberrans from culturally and linguistically diverse backgrounds (CALD).

Mercedes is a stakeholder management professional with a passion for improving language practices within Australian institutions that meet the communication needs of people who have English as a second language.

She holds a Master of Cross-Cultural Communication from the University of Sydney and a degree in Advertising, and is fluent in Spanish and Italian.

Learning and development calendar

Due to the evolving health advice around COVID-19, we have postponed or cancelled some events, or changed them to online platforms. For the most up-to-date information, please visit [actcoss.org.au/learn](https://www.actcoss.org.au/learn).

Next issue

***Update* Issue 92, Winter/Spring 2020 edition:**

**Keeping Connected with Culture & Community: Aboriginal &/or Torres Strait Islander Focus**

Members are welcome to contribute articles on the theme.

Copy deadline: 3 August 2020

Space is limited! To guarantee your spot, let us know as soon as possible.

Email: [suzanne.richardson@actcoss.org.au](mailto:suzanne.richardson@actcoss.org.au)

Ph: 02 6202 7200

Issue 92 will be distributed in September 2020.

## Advertise in Update

Would you like ad space? Contact us!

1/4 page: Member $25; Non-member $55

1/2 page: Member $40; Non-member $85

Full page: Member $60; Non-member $120

About ACTCOSS

The ACT Council of Social Service Inc. (ACTCOSS) is the peak representative body for people living with low incomes or disadvantage, and not-for-profit community organisations in the Australian Capital Territory.

ACTCOSS acknowledges Canberra has been built on the land of the Ngunnawal people. We pay respects to their Elders and recognise the strength and resilience of Aboriginal and Torres Strait Islander peoples. We celebrate Aboriginal and Torres Strait Islander cultures and ongoing contributions to the ACT community.

## Contact details

Address: Weston Community Hub, 1/6 Gritten St, Weston ACT 2611

Phone: 02 6202 7200

Email: [actcoss@actcoss.org.au](mailto:actcoss@actcoss.org.au)

Web: [www.actcoss.org.au](http://www.actcoss.org.au)

Twitter: [twitter.com/ACTCOSS](http://twitter.com/ACTCOSS)

Facebook: [facebook.com/actcoss](https://www.facebook.com/actcoss/)

ACTCOSS welcomes feedback. Please visit the ‘Contact’ page on our website for our feedback form, or contact us using the details above.

## ACTCOSS board

Chair: Glenda Stevens, Associate Member

Vice Chair: Martin Fisk, Menslink

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* Frances Crimmins, YWCA Canberra
* Sarah Murdoch, St John’s Care

If you would like to contact the Board, please contact ACTCOSS and we will put you in touch.

ACTCOSS website: [www.actcoss.org.au](http://www.actcoss.org.au)

## ACTCOSS staff

CEO: Dr Emma Campbell

Policy Team:

* Craig Wallace (Policy Manager)
* Geoff Buchanan
* Eliza Moloney

Capability Team:

* Ryan Joseph (A/g Capability Manager)
* Tara Prince
* Anna Cirocco (from Feb 2020)

Gulanga Program Team:

* Julie Butler
* Kim Peters

Operations Team:

* Stephanie Crosby (Operations Manager)
* Suzanne Richardson
* Kathy Ehmann (until Mar 2020)
* Holly Zhang

## Disclaimer

*Update* is a quarterly journal that provides an opportunity for issues relevant to ACTCOSS’s membership to be discussed and for information to be shared. Views expressed are those of individual authors and do not necessarily reflect the policy views of ACTCOSS.

1. J Hickel and G Kallis, ‘Is Green Growth Possible?’, New Political Economy, 2019, <<https://www.tandfonline.com/doi/full/10.1080/13563467.2019.1598964>>.; Decoupling European Environmental Bureau and Make Europe Sustainable for All, Debunked: Evidence and arguments against green growth as a sole strategy for sustainability, Make Europe Sustainable for All, 2019, <<https://mk0eeborgicuypctuf7e.kinstacdn.com/wp-content/uploads/2019/07/Decoupling-Debunked-FULL-for-ONLINE.pdf>>. [↑](#footnote-ref-2)
2. DW O’Neill, AL Fanning, WF Lamb and JK Steinberger, ‘A good life for all within planetary boundaries’, *Nature Sustainability*, 2018, vol.1, pp.88-95, <<https://doi.org/10.1038/s41893-018-0021-4>>. [↑](#footnote-ref-3)
3. K Trebeck and J Williams, *The Economics of Arrival: Ideas for a Grown-Up Economy*, Policy Press, 2019, <<https://policy.bristoluniversitypress.co.uk/the-economics-of-arrival>>. [↑](#footnote-ref-4)
4. For examples of the sort of changes a wellbeing economy necessitate, see ‘From the old way to the new way: how a wellbeing economy will respond to issues differently’ at the Wellbeing Economy website: <<https://wellbeingeconomy.org/oldwaynewway>>. [↑](#footnote-ref-5)
5. J Doody, The ranks of the working poor, Social Europe website, 2019, <<https://www.socialeurope.eu/the-ranks-of-the-working-poor>>.; T Jackson, *The future of jobs: is decent work for all a pipe dream?*, The Conversation website, 2017, <<https://www.theguardian.com/global-development-professionals-network/2017/aug/15/the-future-of-jobs-is-decent-work-for-all-a-pipe-dream?CMP=Share_AndroidApp_Gmail>>. [↑](#footnote-ref-6)
6. Poverty and Inequality Commission, Key facts, Poverty and Inequality Commission website, Glasgow, 2020, <<https://povertyinequality.scot/poverty-scotland/>>. [↑](#footnote-ref-7)
7. United Nations Sustainable Development Goals: <<https://sustainabledevelopment.un.org/sdgs>>. [↑](#footnote-ref-8)
8. For a collection of news articles about Wellbeing Economy Governments (WEGo), visit: <<https://wellbeingeconomy.org/tag/wego>>. [↑](#footnote-ref-9)
9. OECD Better Life Initiative, How’s Life in Costa Rica?, OECD, 2017, <<https://www.oecd.org/countries/costarica/Better-Life-Initiative-country-note-Costa-Rica.pdf>>. [↑](#footnote-ref-10)
10. D Gelles and D Yaffe-Bellany, Shareholder Value Is No Longer Everything, Top C.E.O.s Say, New York Times website, 21 August 2019, <<https://www.nytimes.com/2019/08/19/business/business-roundtable-ceos-corporations.html>>. [↑](#footnote-ref-11)
11. Wellbeing Economy Alliance website:<<https://wellbeingeconomy.org/>>. [↑](#footnote-ref-12)
12. A fuller list including steps for other sectors is found in K Trebeck and J Williams, The Economics of Arrival: Ideas for a Grown-Up Economy, Policy Press, 2019, <<https://policy.bristoluniversitypress.co.uk/the-economics-of-arrival>>. [↑](#footnote-ref-13)
13. K Hall, *“Benign Indifference”: Settlement, integration and social cohesion through the eyes of Canberra migrants*, Masters Research Thesis, Deakin University, 2019. [↑](#footnote-ref-14)
14. India, South Africa, Suriname, Iran, England, China, New Zealand, the USA, Guatemala, Sri Lanka and Turkey. [↑](#footnote-ref-15)
15. L Manderson, ‘Social capital and inclusion: locating wellbeing in community’, *Australian Cultural History*, 2010, vol.28, no.2-3, pp.233-252, <<https://doi.org/10.1080/07288433.2010.585516>>.; S Gifford, I Correa-Velez and R Sampson, *Good Starts for recently arrived youth with refugee backgrounds: Promoting wellbeing in the first three years of settlement in Melbourne, Australia*, La Trobe Refugee Research Centre, La Trobe University, Melbourne, 2009, <<http://goodstarts.net/files/Reports/Good_Starts_Report_-_the_first_4_years_(2009).pdf>>.; C McMichael, ‘Everywhere is Allah’s place: Islam and the everyday life of Somali women in Melbourne, Australia’, *Journal of Refugee Studies*, 2002, vol.15, pp.171-188.; J Sanders, V Nee and S Sernau, ‘Asian immigrants’ reliance on social ties in a multiethnic labour market’, *Social Forces*, 2002, vol.81, pp.281-314.; E Foroughi, R Misajon and RA Cummins, ‘The Relationships Between Migration, Social Support, and Social Integration on Quality of Life’, *Behaviour Change*, 2001, vol.18, no.3, pp.156-167. [↑](#footnote-ref-16)
16. T Li, C Chu, F Meng, Q Li, D Mo, B Li and S Tsai, ‘Will Happiness Improve the Psychological Integration of Migrant Workers?’, *International Journal of Environmental Research and Public Health*, 2018, vol.15, no.5, pp.900-922, <<https://doi.org/10.3390/ijerph15050900>>.; S Georgiades, ‘Greek Immigrants in Australia: Implications for Culturally Sensitive Practice’, *Journal of Immigrant Minority Health*, 2015, vol.17, pp.1537-1547, <<https://doi.org/10.1007/s10903-014-0128-2>>.; E Kong, ‘Building Social and Community Cohesion: The Role of Social Enterprises in Facilitating Settlement Experiences for Immigrants from Non-English Speaking Backgrounds’, *The International Journal of Interdisciplinary Social Sciences*, 2011, vol.6, no.3, pp.115-128.; E Yoon, R Lee and M Goh, ‘Acculturation, Social Connectedness, and Subjective Well-Being’, *Cultural Diversity and Ethnic Minority Psychology*, 2008, vol.14, no.3, pp.246-255, <<https://doi.org/10.1037/1099-9809.14.3.246>>.; E Foroughi, R Misajon and RA Cummins, ‘The Relationships Between Migration, Social Support, and Social Integration on Quality of Life’, *Behaviour Change*, 2001, vol.18, no.3, pp.156-167.; B Palisi, ‘Interaction with Kin, Social-Status and Well-Being: Cross-Cultural Evidence from Males’, *International Journal of Comparative Sociology*, 1985, vol.26, pp.14-34. [↑](#footnote-ref-17)
17. JW Berry, ‘Acculturation: Living successfully in two cultures’, *International Journal of Intercultural Relations*, 2005, vol.29, pp.697-712.; JW Berry, ‘Immigration, acculturation, and adaptation’, *Applied Psychology: An International Review*, 1997, vol.46, pp.5-34. [↑](#footnote-ref-18)
18. M Savic, R Room, J Mugavin, A Pennay and M Livingston, ‘Defining “drinking culture”: A critical review of its meaning and connotation in social research on alcohol problems’, *Drugs: Education, Prevention and Policy*, 2016, vol.23, no.4, pp.270-282, DOI: <<https://doi.org/10.3109/09687637.2016.1153602>>. [↑](#footnote-ref-19)
19. Australian Bureau of Statistics, *Net overseas migration, Arrivals, departures and net, State/territory, Age and sex - Calendar years, 2004 onwards*, Australian Bureau of Statistics, 2020, <<http://stat.data.abs.gov.au>>. [↑](#footnote-ref-20)
20. The International Wellbeing Group, Personal Wellbeing Index – Adult, Centre on Quality of Life, Deakin University, 2013, <<http://www.acqol.com.au/uploads/pwi-a/pwi-a-english.pdf>>. [↑](#footnote-ref-21)
21. S Groch, ‘Canberra teens struggling with high rates of psychological distress: report’, Canberra Times, 23 October 2019, <<https://www.canberratimes.com.au/story/6449569/why-are-act-teens-in-distress-alarming-new-mental-health-report/>>. [↑](#footnote-ref-22)
22. ACT Government, A Picture of children and young people in the ACT 2018, ACT Government, 2019. [↑](#footnote-ref-23)
23. headspace School Support, Understanding Suicide, suicide attempts and self-harm in primary school aged children: Evidence Summary, headspace, 2017. [↑](#footnote-ref-24)
24. Families ACT, 2019-2020 Budget Submission: The Missing Middle: Supporting middle years children in the ACT, Families ACT, October 2018. [↑](#footnote-ref-25)
25. K Lloyd and L Emerson. ‘(Re)examining the relationship between children’s subjective wellbeing and their perceptions of participation rights’, Child Indicators Research, vol.10, 2017, p.604 [↑](#footnote-ref-26)
26. National Children’s Commissioner, Children’s Rights Report 2019: In Their Own Right: Children’s Rights in Australia*,* 2019, p.62. [↑](#footnote-ref-27)
27. ibid, p.63. [↑](#footnote-ref-28)
28. ACON, Pride in Health + Wellbeing, ACON’s Pride Inclusion Programs website, 2019, <<https://www.prideinclusionprograms.com.au/health/>>. [↑](#footnote-ref-29)
29. MP Denato, ‘The minority stress perspective’, Psychology and AIDS Exchange Newsletter, American Psychological Association, April 2012, <<https://www.apa.org/pi/aids/resources/exchange/2012/04/minority-stress>>. [↑](#footnote-ref-30)
30. F Perales and A Todd, ‘Structural stigma and the health and wellbeing of Australian LGB populations: Exploiting geographic variation in the results of the 2017 same-sex marriage plebiscite’, Social Science & Medicine, vol.208, July 2018, pp.190-199, <<https://www.sciencedirect.com/science/article/abs/pii/S0277953618302508>>, in F Perales, How stigma impacts LGB health and wellbeing in Australia, The Conversation website, 4 June 2018, <<http://theconversation.com/how-stigma-impacts-lgb-health-and-wellbeing-in-australia-96904>>. [↑](#footnote-ref-31)
31. ACT Government, Capital of Equality: An ACT Government strategy to deliver equitable outcomes for Lesbian, Gay, Bisexual, Trans, Intersex & Queer (LGBTIQ+) people: 2019-23, ACT Government, n.d., <<https://www.cmtedd.act.gov.au/policystrategic/the-office-for-lgbtiq-affairs>>. [↑](#footnote-ref-32)
32. See the Office for LGBTIQ+ Affairs web page: <<https://www.cmtedd.act.gov.au/policystrategic/the-office-for-lgbtiq-affairs>>. [↑](#footnote-ref-33)
33. See the LGBTIQ+ Ministerial Advisory Council web page: <<https://www.cmtedd.act.gov.au/policystrategic/the-office-for-lgbtiq-affairs/lgbtiq-ministerial-advisory-council>>. [↑](#footnote-ref-34)
34. See the ACT Safe and Inclusive Schools Initiative in the School Community Initiatives web page: <<https://www.education.act.gov.au/support-for-our-students/Inclusion-and-Wellbeing/school-and-community/school-initiatives>>. [↑](#footnote-ref-35)
35. See Capital of Equality Grants 2020 in the Office for LGBTIQ+ Affairs web page: <<https://www.cmtedd.act.gov.au/policystrategic/the-office-for-lgbtiq-affairs>>. [↑](#footnote-ref-36)
36. E Hopper, Maslow's Hierarchy of Needs Explained, ThoughtCo. website, 2020, <<https://www.thoughtco.com/maslows-hierarchy-of-needs-4582571>>. [↑](#footnote-ref-37)
37. Chief Minister Andrew Barr, ‘Measuring a Healthy Canberra’, Speech to ANU and UC, May 2020. [↑](#footnote-ref-38)
38. Rent.com.au, Rent.com.au rental market snapshot: January 2020, Rent.com.au website, 2020, <<https://www.rent.com.au/blog/rental-snapshot-january-2020>>. [↑](#footnote-ref-39)
39. National Shelter, Community Sector Banking, SGS Economics and Planning and Brotherhood of St Laurence, Rental Affordability Index, prepared by SGS Economics and Planning, November 2019, <<https://www.sgsep.com.au/assets/main/Projects/SGS-Economics-and-Planning_RAI-November-2019.pdf>>. [↑](#footnote-ref-40)
40. Productivity Commission, Report on Government Services 2020: Part G: Housing and homelessness, Australian Government, 2020, <<https://www.pc.gov.au/research/ongoing/report-on-government-services/2020/housing-and-homelessness>>. [↑](#footnote-ref-41)
41. SQM Research, Residential vacancy rates, City: Canberra, 2020, <<https://sqmresearch.com.au/graph_vacancy.php?region=act%3A%3ACanberra&type=c&t=1>>. [↑](#footnote-ref-42)
42. L Tooth et al., From child-care to elder care: Findings from the Australian Longitudinal Study on Women’s Health, Report prepared for the Australian Government Department of Health, 2018, <<http://www.alswh.org.au/images/content/pdf/major_reports/ALSWH%202018%20Major%20Report_Caring%20final.pdf>>. [↑](#footnote-ref-43)
43. Deloitte Access Economics, The Economic Value of Informal Care in 2015, Report for Carers Australia, 2015. [↑](#footnote-ref-44)
44. PwC Consulting Australia, The cost of perinatal depression and anxiety in Australia, prepared for Gidget Foundation Australia, Perinatal Wellbeing Centre, PANDA and Peach Tree Perinatal Wellness, November 2019, <<https://www.perinatalwellbeingcentre.org.au/news/cost-of-perinatal-depression-and-anxiety-in-australia>>. [↑](#footnote-ref-45)
45. M Rasmussen et al., ‘Risk, treatment duration, and recurrence risk of postpartum affective disorder in women with no prior psychiatric history: A population-based cohort study’, PLOS Medicine, 2017. [↑](#footnote-ref-46)
46. Australian Institute of Health and Welfare, Maternal Deaths in Australia, data for 2016, released 20 December 2018. [↑](#footnote-ref-47)
47. Australian Institute of Health and Welfare, Maternal Deaths in Australia, data for 2017, released 26 November 2019. [↑](#footnote-ref-48)
48. Australian Institute of Health and Welfare, National Core Maternity Indicators, released 18 September 2019. [↑](#footnote-ref-49)